



# State of New Hampshire 2006 ANNUAL REPORT

The following information shall be given as of January 1  
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2006

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE  
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 03/27/2006

Business ID: 5402

William M. Gardner

Secretary of State

BLACKHAWK CORPORATION

76 EXETER STREET

NEWMARKET , NH 03857

ADDRESS OF PRINCIPAL OFFICE:

76 EXETER STREET

NEWMARKET , NH 03857

REGISTERED AGENT AND OFFICE:

LANE W CHENEY

76 EXETER STREET

NEWMARKET , NH 03857

ENTITY TYPE: CORPORATION

BUSINESS ID: 5402

STATE OF DOMICILE: NEW HAMPSHIRE

FEDERAL ID: 020274588

REAL ESTATE & CONTRACT FOR LAND SALE

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.



The new mailing address



The new principal office address

PO Box is acceptable.

## OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

NAME Lane W. Cheney

STREET 76 Exeter St.

CITY/STATE/ZIP Newmarket, NH 03857

NAME Walter E. Cheney

STREET 76 Exeter St.

CITY/STATE/ZIP Newmarket, NH 03857

NAME Ann M. Adams

STREET 76 Exeter St.

CITY/STATE/ZIP Newmarket, NH 03857

NAME June M. Barry

STREET 76 Exeter St.

CITY/STATE/ZIP Newmarket, NH 03857

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

## BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

NAME Lane W. Cheney

STREET 76 Exeter St.

CITY/STATE/ZIP Newmarket, NH 03857

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

To be signed by an officer, director, or any other person authorized by the board of directors.  
I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Please print name and title of signer:

Lane W. Cheney

/ President

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A  
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529